

***** IMPORTANT PLEASE READ THE TEXT
BELOW ABOUT WHO IS ELIGIBLE TO BID
FOR THIS CONTRACT *****

Description

CMS has released a Request for Proposals (RFP) to the CMS Medicaid Research and Demonstration Task Order (RADSTO) organizations for proposals to accomplish evaluative research of the FY05 Real Choice Systems Change Grants. The purpose of this contract is to: examine the system and beneficiary impacts of the Fiscal Year 2005 (FY05) Real Choice Systems Change (RCSC) Grants; provide limited technical assistance (TA) to CMS regarding strategic planning and grants management; and provide limited TA to FY05 grantees regarding strategic planning, evaluation strategies, and outcome measurement. This contract will run for the duration of the FY05 Grants.

Only those organizations that are part of the CMS Medicaid RADSTO List will be eligible to apply for this initiative. We've posted a description of this proposed project here for informational purposes only. This information is available to interested applicants who are applying for a FY05 RCSC Grant, in order to have a better understanding of the systems and impacts research and limited technical assistance that will be procured for the FY05 Grants and CMS via this research contract.

**Systems and Impact Research and Technical Assistance (TA) for CMS
Fiscal Year 2005 (FY05) Real Choice Systems Change
(RCSC) Grants**

**Request for Proposals
STATEMENT OF WORK**

I. Purpose of Contract

The purpose of this contract is to: examine the systems and impacts of the Fiscal Year 2005 (FY05) Real Choice Systems Change (RCSC) Grants; provide limited technical assistance (TA) to Centers for Medicare & Medicaid Services (CMS) regarding strategic planning, and grants management; and provide limited TA to FY05 RCSC grantees regarding strategic planning, evaluation strategies and outcome measurement. The information from this work will be used to inform interested partners within the Department of Health and Human Services, congressional sponsors, all Systems Change Grantees, and Federal and state decision-makers. This contract will run for the duration of the FY05 RCSC Grants in order to capture the activities and outcomes of the specific grants being evaluated under this contract.

The activities included in this contract are to support CMS in the administration of the FY05 RCSC Grants. In FY05 CMS is awarding approximately \$ 30 million for grants under the Social Security Act Section 1110 demonstration authority that permits the testing of methods to improve the effectiveness of the Medicaid program. This includes: approximately 20 Aging and Disabilities Resource Center (ADRC) Grants and 10 Family to Family Health Information and Education Center (FTF) Grants from September 30, 2005 through September 2008; and approximately 8-12 Systems Transformation (ST) Grants from September 30, 2005 through September 2010. For detailed information regarding the FY05 grant opportunities (including specific grant application requirements) please visit <http://www.grants.gov>. For additional information regarding the RCSC Grant program visit <http://www.cms.hhs.gov/newfreedom>.

1. The FY05 RCSC Grants include:

- ADRC Grants: to stimulate the development of state systems that integrate information and referral, benefits and options counseling services as well as facilitating access to publicly and privately financed long term care services and benefits;
- FTF Grants: to develop and implement information and referral networks for parents of children with special health care needs; and
- ST Grants: to achieve systems transformation resulting in the effective delivery and balance of institutional and Home and Community Based Services (HCBS) for the Medicaid consumer; and 2) to further the vision of transforming system infrastructure by providing states with the assistance needed to commence or further current initiatives to implement this vision.

2. Specifically, the Contractor will:

- Communicate with the Administration on Aging (AoA), and CMS regarding the FY05 ADRC Grants for the purpose of including key information regarding systems and impacts to include in reports under this contract.
- Collect limited systems changes and impact information for the FTF Grants and include this information in relevant reports under this contract.
- Conduct intensive systems and impact analyses for the FY05 ST Grants to include the following activities:
 - Develop a ST Grant Strategic Plan Template
 - Provide TA to Grantees regarding the use of the Strategic Plan Template and the Grantees evaluation strategy;
 - Provide limited TA to CMS and ST grantees regarding outcome measurement;
 - Develop strategic plan review criteria, conduct strategic plan reviews, and provide recommendations to CMS and Grantees; and
- Provide programmatic TA to CMS for its' grant monitoring program.

II. Background

In 1990, Congress enacted the Americans with Disabilities Act (ADA) (Pub. L. 101-336). The ADA recognized that “society has tended to isolate and segregate individuals with disabilities, and, despite some improvements, such forms of discrimination against individuals with disabilities continue to be a serious and pervasive social problem” (42 U.S.C. §12101(a)(2)). The ADA gave legal expression to the desires and rights of Americans to lead lives as valued members of their own communities despite the presence of disability.

Fulfillment of the 1990 ADA has been the subject of further State and Federal leadership through the President’s New Freedom Initiative. In February 2001, President George W. Bush announced this broad new initiative to “tear down barriers to equality” and grant a “new freedom” to children and adults of any age, with any payer source, who have a disability or long-term illness so that they may live and prosper in their communities. For more information on CMS activities related to the President’s New Freedom Initiative, visit <http://www.cms.hhs.gov/newfreedom>.

Over the past few years, a consensus for assertive new steps to improve the capacity of our long-term support systems to respond to the desires of our citizenry has been building. Federal, State, and local governments have begun to take actions to renew and reaffirm a commitment to improving the systems that will support people of any age, with any payer source, with a disability or long-term illness that wish to live in their communities.

Congress recognized that states face formidable challenges in their efforts to fulfill their legal responsibilities under the ADA. In fiscal years 2001, 2002, 2003 and 2004 the Congress appropriated funds for Real Choice Systems Change Grants, specifically to improve community-integrated services and CMS awarded grants totaling approximately

\$188 million to 50 states, the District of Columbia, and two territories. With this support, states are continuing to address issues such as personal assistance services, direct service worker shortages, transitions from institutions to the community, respite service for caregivers and family members, and better transportation options. CMS has an ambitious national technical assistance strategy to support States' efforts to improve community-based service systems and enhance employment supports. CMS is also helping States assist each other by posting a repository of "Promising Practices" on its Web site at <http://www.cms.hhs.gov/promisingpractices> and by supporting the dissemination of technical assistance materials at <http://www.hcbs.org>.

III. INSTRUCTIONS TO OFFERORS

The Contractor should adhere to the instructions found in the **Technical Proposal Instructions** in preparing a response to this Request for Proposals

IV. Specific Tasks

The selected Contractor shall provide the necessary personnel, materials, equipment, support, and supplies to accomplish the tasks shown below in the specified time. The Contractor shall complete the analyses and submit written reports of the findings to CMS. All work initiated under this task order shall be performed under the general guidance of the CMS Project Officer (PO) or his/her representative, and is subject to the CMS Project Officer's approval. The Contractor should refer to the **Schedule of Deliverables**.

We will require the Contractor to establish the initial framework and foundation for systems and impact evaluation activities for FTF and ST grants. The contractor shall also maintain communication with AoA concerning the progress and implementation of the ADRC grants. Information from the ADRC grants will be included in reports for this contract as directed by the CMS Project Officer (PO).

The Contractor will review, analyze, and evaluate the grantees' strategies, challenges, systems' changes and outcomes, and summarize the impact to beneficiaries, and progress toward goals as described in the CMS FY05 Grant Solicitation terms and conditions and as submitted in their grant proposals. The Contractor will report information from the ADRC, FTF, and ST grantees regarding innovative methods and programs in Home and Community Based Services (HCBS).

Task 1.0 System and Impact Evaluation Activities and Reports

In order for CMS to effectively evaluate implementation of its RCSC Grant program, achieve evaluation research goals, and provide timely information to Grantees, the first priority for this contract is to conduct the ongoing system and impact analyses. For this contract, CMS defines "system evaluation" as the analysis of grant outputs, service delivery changes, and barriers in reaching short-term objectives, and lessons learned as grantees implement systems changes. CMS defines "impact evaluation" as: analyses of grants' scope and effectiveness reaching long-term outcomes and achieving grant goals,

i.e., the impact on the individual beneficiary and the state's long term care programs as a result of the system changes. The system and impact research tasks of this contract include annual collection, analysis, and reporting of grant information as described here as well as in-depth specific topic analyses and reports.

I.A. Systems and Impact Analyses for Funded FY05 RCSC Grants

(1) ADRC Grants

The AoA is conducting the analysis and evaluation of the ADRC grants. The contractor shall communicate with CMS and AoA to collect information about the ADRC system changes and impact analysis for specified reports of this contract.

Due date: yearly 30-90 days after submission of annual report to AoA

(2) FTF Grants

The Contractor shall conduct systems and impact analyses of the FY05 FTF grants to report the innovative and effective strategies implemented to reach families and provide support. For those FTF grantees who have conducted an assessment or evaluation of their strategies and methods, this will include results of these assessments and a summary of results across the FTF grants who have conducted these activities for each year of the grants (FY06, FY07 and FY08) including:

- a. strategies and methodologies implemented and impacts;
- b. identified challenges and barriers facing grantees in the implementation of their grants and how they are being addressed, or were addressed;
- c. recommendations to Federal and state decision-makers that would assist and support the continuation of efforts and work accomplished by FTF grants.

It is expected that for this contract, no more than 5% of the Contractor's time and resources shall be used for FTF grants research activities.

Due date: yearly 30-90 days after submission of annual web-based report to CMS

(3) ST Grants

The Contractor shall conduct system and impact analysis of ST grants and evaluate information across the ST grants for each year of grants operation (five years total). The systems and impact analyses will be conducted for the objectives of each goal, as described in the FY05 RCSC Grant Solicitation. Each ST grant will address at least 3 of the following goals:

- Improved Access to Long Term Support Services;
- Self Directed Services;
- Quality Management and Improvement System;
- Information Technology to Support Systems Change
- Financing Reform; and
- Long Term Supports Coordinated with Affordable and Accessible Housing.

(3.a.) Systems Analysis for ST grants

The contractor shall evaluate the grants' strategies, challenges and barriers, and systems changes and include the key areas related to each grant. Topic areas for analyses will be dependent on the system change goals for each ST grant: For example, topic areas may include the following:

i) how effectively consumers and/or their representatives were involved in project design and are being included in ongoing evaluation of the impact of the grants or as a result of grant strategies and activities;

- how the grant activities and goals chosen were effected by consumer inclusion, the ongoing involvement of consumers, and what the result of consumer involvement on processes and outcomes of grant objectives;
- what approaches or techniques accounted for differences in the effectiveness and extent of consumer involvement.

(ii) Recommendations from Grantees to CMS and other decision makers of changes in policies, practice, laws, or regulations that would support increased access, availability, quality, and value of long term care supports and services:

- what public-private partnerships were formed and how are these being carried out, as well as the effectiveness and results of these partnerships;
- what are the state and Federal policy and programmatic issues that are impacting the implementation of system transformation activities;

(iii) Methods and Factors that have facilitated the systems transformation:

- systems change goals and systems transformation models implemented;
- strategies or methodologies implemented by the states; and
- the challenges and barriers identified, and what changes/adjustments were made (or are being made) to address the issues in order to achieve goals and objectives;
- Key intra-agency and inter-agency coordination and collaboration outcomes.

Due date: biannually 30-60 days after submission of grantee semi-annual and annual web-based reports beginning 2nd quarter of calendar year 2007

(3.b.) Outcome and Impact Analysis of ST Grants

(i) The impact on consumers of long term care services and supports as a result from systems change activities and accomplishments:

- what populations and the numbers of consumers who have been assisted by the implemented changes as well as the

types of assistance and services provided as a result of systems changes;

- the effect on consumers as a result of systems changes that have been implemented; and
- the impact, at the individual level, of implementation of the system change.

(ii) The impact on service delivery systems from systems change activities:

- elements of their Medicaid/Medical Assistance programs or waivers that have been changed; and
- other programs or funding streams that are being utilized to support the long term care needs of children and adults of any age with a disability or long-term illness that grantees are implementing, or barriers to utilizing these funding streams and proposed alternatives;
- the impact, at the systems level, of implementation of the system change.
- The goals and outcomes of grant that have been achieved.

Due date: biannually 30-60 days after submission of semi-annual and annual web-based report to CMS beginning 2nd quarter of calendar year 2007

(3.c.) Analysis of Grantees' Evaluation Strategy

Strategies used to evaluate the effectiveness of their system changes and the impact to beneficiaries and to the long term care systems and supports infrastructure. For example:

- effective measures and processes used by grantees to determine what is working and what is not working to achieve systems transformation;
- effective outcome measures that provided the results of ongoing processes and system changes;
- effective impact measures for systems level and individual level outcomes as a result of the systems changes being captured; and
- effectiveness of the state's quality management strategy.

Due date: Annually 30-60 days after submission of annual web-based report to CMS beginning 2nd quarter of calendar year 2007

1.b. Proposed Systems Change Efforts for FTE and ST Grants: Report #1

The Contractor shall conduct an initial analysis of the funded FY05 ST grants and proposed systems transformation and prepare a summary report to include:

- Current level of transformation;

- Goals and objectives for the grant;
- The target populations and entities/agencies which will be included and effected by change efforts;
- The system change strategies identified; and
- The identified challenges and barriers Grantee will be addressing to improve their system of long-term care.

Due Date: 60 days from date of FYO5 grants award.

1.c. Annual Reports: Systems Outcomes and Impact Reports for FTF and ST Grants # 2, 3, and 4

(1.) Due date of the draft of the annual report: 120 days after the Grantees' Annual Reports submission.

- FTF grants FY06, FY07 and FY08 (no final reports are required for FTF grants)
- ST grants FY06, FY07, FY08, FY09, and FY10 (final reports are due in FY10 for the ST grants)

Annual reports for FTF grants shall include elements under I.A.(2). Annual reports for ST Grants shall address elements in I.A (3)a, b, and c. (Grantee's web-based annual report is due 60 days after the end of the Federal Fiscal year-November 30.)

(2.) Due date of final annual report: After incorporation of any CMS comment or changes, the Final report due date is TBD for years 2006, 2007, 2008, and 2009.

1.d. Development of Topic Issue Papers for ST Grants

Based upon information received from Grantees and their individual technical assistance providers, CMS will request that the Contractor examine additional questions (TBD). This will include analysis and summary for a Grants category on a specified topic and may include one or more elements under 3.a. TBD by CMS and with approval by contract PO.

Topic Issue Papers will include specific elements, TBD as described under section 3. ST Grants.

Due Dates:

2007: One Topic Paper due 3rd quarter of calendar year, date TBD.

2008: Two papers: 1st Topic Paper of 2008 due 2nd quarter of calendar year, 2nd Topic paper due 4th quarter of calendar year 2008, date TBD.

2009: Two papers: 1st Topic Paper of 2009 due 2nd quarter of calendar year, 2nd Topic paper due 4th quarter of calendar year 2009, date TBD

Drafts of Topic papers: due to the CMS PO 60 days prior to final due dates, and

Final of Topic papers: CMS will review draft papers and provide comments back on or before 30 days before final due dates.

1.e. Final Systems, Outcomes, and Impact Analysis for ST Grants

(1.) For Year Five, the Contractor shall address issues in prior annual reports and any grantee-specific products that may be useful, the Web-based grantee reports, and grantee interviews to provide a summary impact analysis of the resultant state long term care infrastructure changes for the FY 05 grants.

(1.a.) The analysis should address the effectiveness of grantees in reaching the following goals:

Improved Access to Long Term Support Services;

Self Directed Services;

Quality Management and Improvement Systems;

Information Technology to Support Systems Change;

Financing Reform; and

Long Term Supports Coordinated with Affordable and Accessible Housing.

(1.b.) The summary impact analysis shall also include summary information on the following elements reflective of the grantee selected goals and outcomes.

Systems analysis:

- how effectively consumers and/or their representatives were involved in project implementation;
- remaining recommendations from Grantees to CMS and other decision makers of changes in policies, practice, laws, or regulations that would support increased access, availability, quality, and value of home and community based services;
- barriers that continue to prevent the access of funding streams and other alternatives that were tried; and
- factors that were key in achieving systems transformation;

Impact Analysis:

- populations and the numbers of consumers who have been assisted by the implemented changes;
- the impact, at the beneficiary level, of implementation of the system changes; and
- impact on service delivery systems from systems change activities:
 - Medicaid/Medical Assistance programs or waivers that have been changed;
 - other programs or funding streams that have been utilized to support the long term care needs of children and adults of any age with a disability or long-term illness that grantees are implementing; and
 - The goals and outcomes of grant that have been achieved.

1.f. Final Systems Outcomes and Impact Analysis Summary Report for ST Grants

Draft Due date: 90 days after the submittal of the grantees last semi-annual report.

Final Due date: 60 days after submittal of the draft final report (within 20 days of receipt of any comments from the contract PO).

Reporting Format and Instructions

The Contractor shall prepare all reports described herein. Each report shall have the background, significance, methods, results, and conclusions for CMS and government use. Each report shall contain a two to four-page Executive Summary. Excluding the Executive Summary, tables, figures, and appendices, the report shall not be more than 50 pages long.

The Final Report shall be delivered in four formats;

- 1) Paper, bound (10 copies);
- 2) Paper, unbound, suitable for use as camera-ready copy;
- 3) Electronic, in a format prepared with Microsoft WORD 2000, or another format agreed upon by PO [for text] or Microsoft Excel [for tables]; and
- 4) Electronic, in Hypertext Markup Language (HTML) format for posting on the CMS website. Data tables must be in HTML format as well. Charts and graphics must be in .gif format. Data files (spreadsheets, databases) must be made available primarily as comma-delimited or flat files, with proprietary file formats (Excel, Access) available as alternative downloads. Finally, the project officer may require a Portable Document Format (.pdf) version of the entire deliverable in addition to the above.
- 5) Documents submitted in .pdf must be prepared using Adobe Acrobat 5.0 (or subsequent versions) to assure full compliance with the requirements of Section 508 (Rehabilitation Act) when placed on CMS's Website.

More detailed guidelines for creation of Internet-ready content are available on CMS's website at <http://www.cms.gov>. (The Final Report shall conform to CMS's Author's Guidelines: Grants and Contracts Final Reports). In addition the Contractor shall provide a 200-word abstract/summary of the final report suitable for submission to the National Technical Information Service (NTIS).

Task 2.0 Strategic Plan Template and Related Technical Assistance (TA)

2.a. Strategic Plan Template

As described in the FY 05 Grant Solicitation, ST grantees are required to submit proposed goals and objectives, an outline of their strategic plan, and the process they will be using to develop their strategic plan. The Contractor shall develop and provide to the ST grantees a Strategic Plan Template. The Strategic Plan Template will be used by grantees, as a tool, to fully develop their strategic plan.

The Contractor will provide expert advice and technical assistance to grantees regarding the use of the template and in the development of the Grantees' Strategic Plans.

The Strategic Plan template should include the following:

1. Mission Statement: Defines the core purpose(s) of the organization and describes who an organization serves including the role of consumers.
2. Vision Statement: Articulates an achievable image of what the system will look like at the end of the grant period, i.e., improvement of status of consumer directed services for all funding streams (not just Medicaid) and the increased use of individual budgets, rebalancing of future funding efforts between institutions and community-based services during the next five years (specify the target populations); and state interagency and intra-agency collaboration;
3. Goals: Articulates desirable and measurable results in achieving the vision and how collaboration and coordination of all the RCSC Grants will occur in order to make progress, decrease barriers, and leverage to achieve ST grant goals and achievement of proposed outcomes.
4. Objectives: Identify quantifiable interim steps toward achieving goals and serve as the basis for measuring progress including how current barriers will be addressed to achieve ST grant goals.
5. Strategies: Specific actions that will be taken to accomplish your objectives including:
 - joint initiatives between state housing and service agencies;
 - components-to-scale (the grantee's ability to implement beyond a few pilot projects with implementation statewide being the most extensive implementation); and
 - laws and regulations to further systems change efforts; and activities and methodologies.
6. Implementation plan: Includes specific activities and defines specific benchmarks. It should include start and end dates including how Medicaid state plan options for individuals with disabilities for home and community-based waivers for the next five years will be implemented. It should also include how covered populations will be increased under Medicaid state plans and home and community-based waivers. Tasks should be assigned to a task owner or party accountable for accomplishing the task.
7. Technical Assistance Plan: Identifies any areas/activities for which technical assistance is required, the process for acquiring technical assistance (e.g. contract), the technical assistance entity, and a detailed budget for procurement of technical assistance.
8. Evaluation Plan:
Must include such items as:

- a. Outcome measures that identify (a) specific areas you will focus on to measure the successful achievement of goals and objectives and (b) how data and information will be collected to support these measures.
- b. Description of your formative learning process and procedures for documentation.
- c. Whether the grantee will contract with an evaluator to assist with the evaluation plan development and implementation. If an evaluator's services are being purchased, specify what tasks the evaluator will perform and include the evaluator's costs in the grant budget.
- d. Identification of baseline data, how it will relate to the goals selected, and how it will be collected.
- e. Explanation of how input from consumers, stakeholders, and the advisory board will be used to guide the evaluation.

Due Date Draft Strategic Plan: within 45 days after contract award date.

Due Date Final of Strategic Plan: no later than 60 days after the start date of this contract to CMS. The contractor shall disseminate the strategic plan template in conjunction with a summary of the strategic plan review criteria (Task 2C) to the grantees no later than 90 days after award of this contract or 60 days after award of the ST grants.

(2.) After review and approval by CMS, and incorporation of any recommendations to the draft strategic plan template, the Contractor shall do a presentation of the final Strategic Plan template to CMS at its' headquarters in Baltimore, Maryland.

2.b. Individual Grantee TA assistance with Strategic Plan

The Contractor shall:

(1.) Conduct a group teleconference to instruct ST grantees on use of the Strategic Plan template within 30 days of the ST grants award. This will include providing:

- definitions and descriptions of sections, subsections, and specific elements of Strategic Plan;
- instructions as to how to complete template;
- examples of information that is required in each section of template;
- level of detail needed in each section and subsections;
- format, organization, and length of information.

Note: The Contractor shall not provide programmatic TA to the grantees related to the state specific issues that effect the content of the grantee strategic plan or its implementation.

(2.) Conduct an individual ST grantee onsite assessment within 90 days of award of the ST grants and provide individual TA with each grantee on the use of the

strategic plan template and development of each grantee's evaluation strategy within the plan;

(3.) After the completion of onsite visit and individual TA, provide ad-hoc assistance to grantees regarding the strategic plan template; and

(4.) Conduct, at a minimum, one individual teleconference with each Grantee by end of month seven of ST grant awards to assist the grantee to identify any gaps, problems, or issues with the plan that the Grantee needs to resolve before submitting final the Strategic Plan to CMS.

Note: All strategic plans must be submitted by ST grantees by end of month nine of grantee award- June 30, 2006.

2.c. Development of Strategic Plan Evaluation Criteria

The Contractor shall develop the review criteria for use by CMS and the contractor in evaluating the ST grants strategic plans:

- Draft of evaluation criteria will be submitted to CMS 60 days after the start date of contract;
- CMS will provide comments back within 30 days of receipt of draft;
- The contractor will disseminate a summary and description of the review criteria to the grantees in conjunction with the Strategic Plan template (Task 2A) no later than 90 days after the award of this contract and no later than 60 days after the award of the ST grants.
- Evaluation Criteria will be finalized with the CMS PO approval and final Criteria submitted 90 days after start date of contract to CMS.

2.d. Evaluation of ST Grants' Strategic Plans

The contractor is required to propose a formal process to complete an evaluation of the ST grants Strategic Plans. This process must conclude, for each grant, no later than 30 days after submission of their strategic plan. CMS expects that the grantees will be submitting their strategic plans over a variable time frame (from approximately the fourth month after the date of the grant award until the nine month after the date of the grant award). CMS also recognizes that grantees may submit their applications within a very short time frame, which would compress the workload for the Contractor and for CMS. Therefore, the Contractor needs to develop a contingency plan to allow for this variability in their formal process. It is the expectation of CMS that the Contractor will examine the discreet actions that need to be accomplished under this task and suggest the most efficient and effective method to meet this requirement. In developing the formal process, the Contractor should consider the following:

- Using the established evaluation review criteria, the Contractor will review each grant when it submitted by the grantee;

- Providing recommendations to CMS on the strategic plan review findings. The process must allow for at least five business days for CMS to review and act on the contractor's recommendations;
- Providing meeting arrangements and logistics for all CMS required face-to-face Strategic Plan presentation meetings involving CMS, the Contractor and the grantees as they either present and discuss their strategic plan. (Grantees are required to pay for their own travel and hotel accommodations through their own grant funds.) Each meeting shall be held within 30 days of receipt of each grant's strategic plan submission. The contractor should propose at what point in the review process this meeting shall take place.
- Developing a formal feedback process to the grantee to ensure that the grantee incorporates CMS recommendations.
- Recommending a final approval process to allow grantees to begin the implementation stage of their grant. The proposed process must result in a definitive conclusion so that the grantee can proceed accordingly with grant implementation, or for further development.

2.e. Debriefing of ST Grant Strategic Plans

The Contractor and CMS will conduct a debriefing meeting with each Grantee to go over results of the review and evaluation of the Strategic Plan and any recommended changes to the Strategic Plan.

Due Date: Debriefing meetings will be completed by end of 3rd quarter of calendar year 2006.

Task 3.0 TA to ST Grant with Evaluation Strategy

3.a. The Contractor will provide TA to ST Grantees on the necessary elements of their evaluation strategy, such as types and description of collection and analyses, and evaluation processes including outcome measures and data. TA assistance will be provided from day 45 of this contract award date until individual grantee strategic plans have been submitted and approved by CMS. This includes identification of Grantee's Evaluation Strategy including how they will accomplish the following:

- Ongoing assessment and evaluation activities;
- Who will be implementing the evaluation strategy, (i.e., within the state government or an outside entity);
- If any data currently being collected will be used and how it will be analyzed;
- Any new data collection or processes;
- Identification of infrastructure, process, and outcome measures that will be used to assess and evaluate progress and resulting impact on Medicaid consumers; and
- Feedback process for purposes of addressing barriers so that any necessary adjustments in activities, strategies can be implemented.

3.b. In order to provide TA to the ST grantees, as outlined in 3.a, the Contractor must provide a work plan that shall include how they will complete this task. The Contractor must also address evaluation measures and processes that are implemented including following:

(1) Extent of effectiveness and impact of consumer involvement in programmatic design, implementation and evaluation:

- Impact of improved information resources to assist consumers and their representatives in choosing long-term care providers and supports; and
- Impact of any new payment and delivery strategies and models implemented to improve access, availability, quality and value of community based long term services and supports for children and adults of any age with a disability or long term illness.

(2) Impact of the strategies, systems, processes, and methods for delivery of community-based long-term care services and supports being implemented including the impact of any structural reforms to the State Medicaid Programs, and other federal programs supporting long-term care and effects of structural reforms they implement.

(3) Tools and information for measuring systems transformation that result in changes in access, availability, quality and value of community based long-term care.

NOTE: This Contractor will not assist grantees with the implementation of evaluation activities.

Due Date: The contractor will develop a plan for delivery of TA within 90 days of contract award.

Task 4.0 Technical Assistance for CMS Grant Monitoring Activities and Technical Assistance to CMS Project Officers (CMS PO)

4.a. TA to CMS for CMS PO Grant Monitoring Activities

The Contractor shall also provide technical assistance to CMS for:

(1) Development of a “Project Officer Grant Report Monitoring Protocol” for use by CMS POs in reviewing Grantees’ Semi-Annual and Annual Reports which are submitted by Grantees in to the CMS web-based reporting system;

- PO grant review protocol will identify triggers or flags which indicate Grantees are not proceeding with Grant activities as per Terms and Conditions, work-plan and/or budget and that require further clarification and follow-up by the PO; and
- A PO referral list including resources, and CMS content expert list for PO use to assist in providing accurate information to Grantees for CMS policy; and administrative issues will also be included.

(2) Development, training, and updates to CMS on the PO Grant Report Review Protocol and Grant Program monitoring strategy:

Due Dates:

Drafts of PO Grant Report Monitoring Protocol and CMS Grant Program monitoring strategy: will be developed and submitted to PO for approval within 120 days of the contract award date.

Finals of PO Grant Report Monitoring Protocol and CMS Grant Program monitoring strategy shall be submitted to PO within 14 working days after receipt of CMS comments.

- Training on use of protocol and strategy will be conducted for CMS POs via teleconference or video conferencing will occur within 150 days after contract award date; and
- Any necessary updates to Protocol or Strategy and training will occur annually by end of 3rd quarter of each operational year of the grant.

4.b. TA to CMS with use of PO Grant Report Monitoring Protocol and CMS Grant Program monitoring strategy

The Contractor will conduct semi-annual update meetings with CMS POs:

- Obtain POs input and identify any issues among CMS POs regarding content, use, or other issues regarding Protocol;
- Develop the agenda for meetings and arrange for all logistical matters;
- Meetings will be held via teleconference or video-conferencing; and
- Make any necessary changes to Protocol with approval of contract PO.

4c. Review of Grantees Semi-Annual and Annual Reports

For each contract year, beginning in FY07, the Contractor shall review the grantees semi-annual and annual reports to identify key barriers impeding progress of grants, key outcomes, and other selected, critical data elements of interest to CMS. These data elements will be determined by CMS for each grantee reporting period. This will serve as a “check” or backup for the POs’ reviews and a quality check for CMS in order to ensure that any major issues which could impede the progress of the Grants are identified and addressed by CMS.

Due date review of reports: shall occur within two months of web-based report submission date for grantees.

Due date summary of reports: A brief summary of identified issues needing follow-up will be submitted to the CMS PO will be provided no later than three months after grantee annual report submission.

4.d. CMS Grant Tracking Programs

(1.) The Contractor working with Systems Change Grantees shall provide input to content and design changes necessary to incorporate the FY 2005 grantees into the

established web-based reporting program that is used to track the status of proposed activities and for Grantees to share information on:

- Anticipated or unanticipated challenges and barriers;
- Alternative methodology, approaches and strategies;
- Progress made towards achieving identified goals;
- Evaluative processes and measures; and
- New activities that result from grant projects.

This web based reporting program shall also be used by the Contractor to generate reports as specified in the following reports listed below (1.a.through 1.f.)

(2.) The Contractor, working with CMS and contractor of web-based program for CMS to track the TA that is being provided to Grantees TA shall provide input to content and design changes necessary to update and improve the information available to TA providers, CMS, and Grantees regarding the content and resultant products of the TA being provided to Grantees.

4.e. Input to CMS for the Clearinghouse for the Community Living Exchange Collaborative

The Contractor shall also provide input into the design, content and functionality of the Clearinghouse for the Community Living Exchange Collaborative (www.hcbs.org) especially as it relates to ST grantees and other RCSC grant activities and products. This web-based Clearinghouse provides specialized, in-depth information on themes, topics and promising practices that are of particular interest to RCSC grants and other site visitors.

Task 5.0: Coordination of all Contract Activities

5.1 Work Plan

The Contractor shall prepare a work plan that spells out the implementation of the contract and a template for states to use in developing and writing their strategic plan. The plan will serve as a blueprint for the Contractor's approach to carrying out major contract activities. The strategic plan template will be used by the ST grantees to develop and write their strategic plan. It will identify persons responsible for tasks and time lines for completing required tasks. The plan will also include a schedule of deliverables for the project. The Contractor shall deliver the work plan to the Project Officer and Contract Specialist within 30 days of the contract award. The Project Officer must approve this work plan before work with ST grantees may proceed.

5.2 Contractor/Agency Kick-Off Meeting

The Contractor shall attend a 1-day kick –off meeting at CMS headquarters within 10 working days following award of this contract to discuss the objectives of the contract deliverables, related project issues, strategic plan template and related technical assistance to be provided to Systemic Change Grantees for developing and writing their Strategic Plan, as well as other technical assistance activities for CMS. The Contractor shall present a preliminary time line of all major actions to be accomplished during the course of the contract. Discussion topics will include, but not be limited to the following:

- A review of the purpose of contract tasks and the expected outcomes including system and impact evaluation activities and reports;
- A review of the administrative procedures and assigned personnel;
- A review of deliverables including Strategic Plan template for Systemic Change;
- A review of the support requirements or roles for the 1) Contractor 2) the Project Officer and 3) Contract Specialist; and.
- A review of the preliminary work plan and time line.

The Contractor shall submit a summary of the discussion and decisions reached at this initial meeting to be reviewed and approved by the Project Officer.

5.3 Biweekly Teleconferences with Project Officer

The Contractor shall meet with the Project Officer by teleconference biweekly to discuss technical issues, progress toward project objectives, existing or potential problems, or other issues of importance that impact the progress of this contract. It is expected that the Contractor will closely coordinate with Project Officer on all task order activities. The Contractor will prepare a meeting summary including action and follow-up steps and submit to PO within 3 working days of meeting and after PO review make any necessary changes.

5.4 Quarterly Progress Reports

The Contractor shall prepare and submit Quarterly progress reports outlining all work accomplished during the previous quarter. The report shall:

- Review accomplishments to date, the status of the project compared to its schedule, and proposed work planned for the subsequent quarter;
- Identify and discuss significant problems that have been encountered or are anticipated, including a description of:
 - The Contractor's plans to deal with these problems, and
 - The impact of the problems on the project's schedule. If appropriate, new delivery or completion dates and revised resource estimates should be proposed.
- Include data on planned versus actual expenditures by major task area (discrepancies greater than 10 percent should be noted;

- Include a discussion of substantive findings to date.

The Contractor shall deliver copies of these quarterly reports by email and hard copy (two copies) to the Project Officer and Contract Specialist no later than the 15th of the following month.

Task 6.0 Final Report Grant Monitoring

The Contractor will prepare a final report on the programmatic TA provided to CMS for Grant monitoring and present this information to CMS via a teleconference before the end date of the contract. A draft of report will be due 30 days before end date of the contract. At a minimum, the report will describe the programmatic PO needs experienced by the PO and summarize the types, content and frequency of programmatic TA provided throughout the course of the Grant administrative activities.

Note: Final reports shall be delivered to the CMS Project Officer in the three formats (paper/electronic) stated below and in the required “electronic” formats to the fnlrpts@cms.hhs.gov mailbox before end date of contract:

- 1) Paper, bound, in the number of copies specified;
- 2) Paper, unbound, suitable for use as camera-ready copy;
- 3) Electronic, as one file in Portable Document Format (PDF), as one file in Hypertext Markup Language (HTML), and in Microsoft Word 2000 [for text] or Microsoft Excel [for tables]. Data tables must be in HTML and PDF formats as well. Charts and graphs must be in Graphical Interchange Format. Data files (spreadsheets, databases) must be made available primarily as comma-delimited or flat files, with proprietary file formats (Excel, Access) available as alternative downloads. Documents submitted in PDF must be prepared using Adobe Acrobat 5.0 (or subsequent versions) to assure compliance with the requirements of Section 508 (Rehabilitation Act) when placed on CMS’ Web site. More detailed guidelines for creation of internet-ready content are available on CMS’s Web site at <http://www.hcfa.gov>. (The Final Report shall conform to CMS’s Author’s Guidelines: Grants and Contracts Final Reports--
<http://www.hcfa.gov/research/author4.pdf>.) In addition, the Contractor shall provide a 200-word abstract/summary of the final report suitable for submission to the National Technical Information Service.

Task 7.0 Optional Tasks: Contract Modification

At the option of the government, this contract may be modified to include additional grants in the event that Congress approves funding for RCSC Grants in subsequent years. In the event that a contract modification is necessary, additional funding will be provided to account for the increased level necessary to incorporate the new grants in the Tasks of this contract as written or any new Tasks that may need to be added.